FORM PTO-1083 Docket No.: 200.1133CON2 Date: October 1, 2009

· Mail Stop: AMENDMENT Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

In re application of: Benjamin OSHLACK et al.

Serial No.: 10/701,041 Filed: November 4, 2003

TAMPER-RESISTANT ORAL OPIOID AGONIST FORMULATIONS For:

Sir:

Transmitted herewith is a Supplemental Information Disclosure Statement (2 pages) in the above-identified application.

☐ Peti	etition for extension under 37 C.F.R. 1.136 eturn receipt postcard her: a copy of the Office Action issued on July 20, 2009, in U.	
☐ Filin☐ Peti☐ Fee	ing fee for additional claims under 37 C.F.R. 1.16 utition fee for extension under 37 C.F.R. 1.136 ue set forth in 37 C.F.R. §1.17(p)	
The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0552.		
	check submitted herewith. Fee set forth in 37 C.F.R. §1.17(p) Any patent application processing fees under 37 C.F.R. 1.136 which and it is hereby requested that this be a petition for an auto 1.136.  Oleg lose	7. n are not paid by check submitted herewitt
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